

DEPLOYMENT BOOKLET

DESIGNED FOR FAMILIES

OF

DEPLOYING SOLDIERS



Dated: 1 March 2006

**HHC, INSCOM
Ft. Belvoir, VA 22060**

Contents

Important Phone Numbers.....	1
Handling Emergencies.....	2
Eisenhower Army Medical Center.....	3
Army Community Service.....	3
Army Emergency Relief.....	4
American Red Cross.....	4
Legal Assistance.....	4
Chaplain Support.....	5
Important Documents and Information for Spouses.....	6
Finance/Budget.....	7
Home Security/Crime Prevention.....	8-9
Overseas Travel.....	10
Appendix A: <i>Family Support Information Form</i>	11
Appendix B: <i>Family Support Group Telephone Tree</i>	12
Appendix C: <i>Family Deployment Checklist</i>	13 - 16
Appendix D: <i>Emergency Notification Form</i>	17
Appendix E: <i>Red Cross Notification</i>	18
Appendix F: <i>Car Maintenance</i>	19 - 20
Appendix G: <i>Record of Personal Affairs</i>	21 - 25
Appendix H: <i>Family Budget Worksheet</i>	26 - 27
Appendix I: <i>Notification of Departure from Area</i>	28
Appendix J: <i>Pre-Deployment Checklist</i>	29

Important Phone Numbers

HHC Commander.....	806-6108
HHC 1SG.....	806-6760
INSCOM Command Chaplain.....	706-2043

Ft. Belvoir

Alcohol and Drug Abuse Prevention and Control Program.....	703-805-5991
American Red Cross.....	805-2057
Army Community Service.....	805-4590
Army Emergency Relief.....	805-2277
Child Care Center.....	805-4118
Hourly Care.....	805-4118
Commissary.....	806-6371
Community Mental Health.....	805-0110
Soldier Welcome Center.....	805-0020
Exceptional Family Member Program.....	805-0045
Family Housing.....	805-4451
Hospital (Dewitt)	805-0612
Legal Assistance.....	805-4018
Post Office.....	805-2043
PX, Main Exchange.....	806-5800
Social Work Services.....	805-0488

Emergency Telephone Numbers

Emergency Operations Center.....	706-2000
Military Police.....	805-3104
MP Desk.....	806-3105
MP Activity.....	806-3106
Post Staff Duty.....	805-3012
On-call Chaplain.....	806-3006
Poison Control.....	202-625-3333

HANDLING EMERGENCIES

What if deployed spouse has an emergency?

If your spouse develops a serious problem while deployed, i.e. sickness, injury, etc., the Company Commander or Rear Detachment Commander, a commander's representative, a member of the Family Support Group, and/or the Battalion Chaplain will contact you. If someone else calls you to report an injury to your spouse, call the Company/Rear Detachment Commander immediately to verify it!!!

What if you have an emergency?

If you develop a serious problem while your spouse is deployed, contact one of the following immediately:

Company/Rear Detachment Commander
Chaplain or On-call Chaplain
Red Cross

An emergency may involve the death, critical illness or injury of an immediate family member (spouse, parents or children.)

The medical definition of critically ill or injured means the possibility of death or permanent disability. The commander may approve other situations, not listed above, as emergency in nature.

The Commander/Rear Detachment Commander will maintain contact with the unit on a regular basis and can pass urgent messages to the unit for relay to your spouse. If your spouse's presence is necessary and it is confirmed by appropriate military professionals (Doctor, Red Cross etc.), we will get your deployed spouse home. As soon as the emergency passes, your spouse may return to his/her unit. To assist you in providing pertinent information needed to determine the extent of the emergency, an Emergency Notification Form is at Appendix D.

Sources of help

1. Family Support Groups and the Chain of Concern
2. Company Commander/Rear Detachment Commander and/or 1st SGT/NCOIC
3. Chaplain
4. Army Community Services (ACS) and Family Advocacy Program
6. Consumer Affairs/Financial Assistance Program (CAFAP)

Dewitt Army Medical Center

Hospital Emergency Room: Telephone number: 805-0414/0562/0518.

Advice Nurse: 805-0510

Pharmacy. Located in Hospital. Hours are from 0730 to 2030 Monday through Friday. Saturday hours are from 0930 - 1700. Sunday hours are from 0930 – 1700. Telephone number is 805-0694.

Belvoir Refill Annex. Located in the Main PX Mall. Hours are 9:00 a.m. to 6:00 p.m. Monday to Friday. Telephone: 806-5538.

Mental Health Services. Call for an appointment at 805-0110, Monday through Friday 0730-1630.

Family Health: Belvoir Clinic: 805-0612/0650/0045
Fairfax Family Health Clinic: 703-849-8191

Army Community Services (ACS)

What is Army Community Service? ACS is a multi-service organization designed to assist soldiers and family members by providing programs that will enhance their quality of life. It is the place to go for answers to your questions and help with your problems. It reflects the Army tradition of caring for its own and encouraging self help. Call 805-4590, 805-3413, 805-3436.

How can ACS help? The Fort Belvoir Army Community Service Center provides free assistance for soldiers and their families in the following areas:

- General Information and referral
- Emergency Food Locker/Loan Closet
- Financial Counseling
- Exceptional Family Member Program
- Family Support Group
- Family Member Employment Assistance
- Army Emergency Relief
- Family Advocacy Program
 - Emergency Shelter
 - Emergency Transportation
 - Emergency Respite Care
 - Parent Support Play-Group

Army Emergency Relief

Army Emergency Relief (AER) provides interest free loans and grants for active duty or retired families who find themselves in unexpected emergency financial situations. Call 703-805-2277.

American Red Cross

The American Red Cross at Ft. Belvoir provides 24 hour services to active duty military personnel and their families. Services provided are in the areas of emergency communications, counseling personal or family problems, financial assistance and referral to other agencies.

Duty hours: 703-805-2057

After Duty hours: 202-728-6401

Military Emergencies: 1-877-272-7337

Legal Assistance

To reach the Legal Assistance Office, call 703-805-4018, 805-4394

Q. What specific services can the Legal Assistance Officers perform?

A. They can handle problems, including:

Debtor/creditor relations	Contracts
Landlord/tenant relations	Notarizations
Domestic relations	Wills and powers of attorney
Immigration and naturalization	Consumer affairs
Tax information	Insurance

The Legal Assistance officer cannot handle the following:

- Private income-producing activities
- Representation in civilian courts
- Representation concerning prosecution under the UCMJ

Q. What about preparing a will prior to deployment?

a. Your Legal Assistance Officer can assist you in preparing a will. Please see him/her **PRIOR** to your spouse's deployment. A will is needed to dispose of property and provide for minor children's care in the event of your death or the death of your spouse.

Q. What is a Power of Attorney (POA)? Are there different types of POAs? Do I need one for a deployment?

A. A Power of Attorney is a document with which the soldier authorizes another person (husband, wife, parent) to act on the soldier's behalf.

A **general POA** grants authority over all of the soldier's personal affairs.

Soldiers being deployed may only need a **Special POA**, which will:

- Authorize another person to take possession, operate, and/or register a vehicle
- Authorize hospital or medical care for dependent children
- Dispose of certain property
- Receive and cash pay checks

U.S. ARMY INTELLIGENCE AND SECURITY COMMAND UNIT MINISTRY TEAM

Command Chaplain

Chaplain (COL) Bradford
david.h.bradford@mi.army.mil
(703) 706-2043

Deputy Command Chaplain

Chaplain (LTC) Engle
teengle@mi.army.mil
(703) 706-2265

Chaplain Assistant NCOIC

Master Sergeant Johnson
robert.c.johnson@mi.army.mil
(703) 706-2710

Chaplain Assistant/Operations NCO

Specialist Story
jastory@mi.army.mil
(703) 706-1976

On-call Duty Chaplain

Post MP Desk (703) 806-3104

Command Chaplain's Blackberry

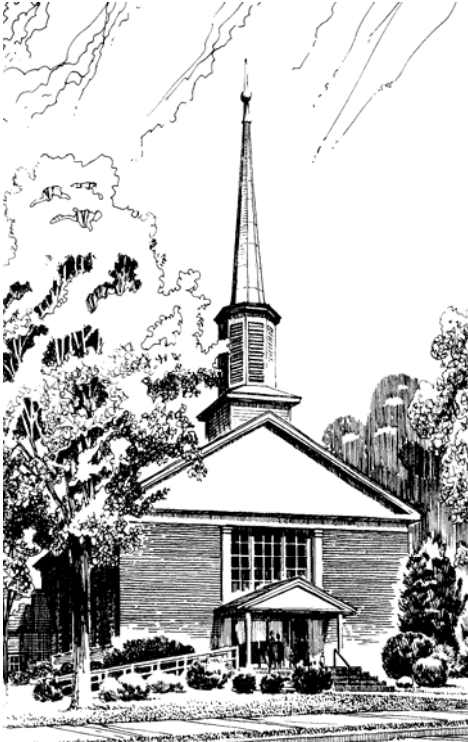
(571) 239-0731

MISSION STATEMENT

PROVIDE COMPREHENSIVE RELIGIOUS SUPPORT TO SOLDIERS,
FAMILY MEMBERS, AND CIVILIANS, ASSISTING THE COMMAND IN
IMPLEMENTING THE FREE EXERCISE OF RELIGION, IN CARING
FOR ITS PEOPLE, AND ACCOMPANYING THEM DURING CRISES,
WAR, AND PEACE.

Religious Activities

Schedule



Fort Belvoir Main Post Chapel

1801 Wright Road
Fort Belvoir, VA 22060
(703) 806-5911

Main Post Chapel

(703) 806-5911
1801 Wright Road, Building 1801 (across
from Commissary)

Belvoir Chapel

(703) 806-4316
5950 12th Street Suite 101 (across from
Dewitt Hospital)

Fairfax Chapel

(703) 805-3510
23rd Street, Building T-435

Contemporary Service

(703) 805-2742
(Held at Fort Belvoir Elementary School)
9500 Barlow Road

Chaplain Family Life Ministry and Training Center

Provides **counseling** and **education** for **couples and families**, call the Chaplain Family Life Center at (703) 805-2742.

- Family Counseling
- Marriage Counseling
- Pre-Marital Counseling
- Parent Support and Training
- Marriage Enrichment Events

Club Beyond, MCYM

We have an active “Club Beyond” Ministry to reach and discipline teens.
Call (703) 805-2727

Wedding Information

Contact Wedding Coordinator for a copy of Wedding Policy and to receive information.
Premarital Counseling is required. Call (703) 805-5106

Roman Catholic

Weekend Mass

1700 Saturday	Belvoir Chapel
0730 Sunday	Mt. Vernon Chapel
0900 Sunday	Mt. Vernon Chapel
0900 Sunday	Fairfax Chapel (Spanish)
0930 Sunday	Belvoir Chapel
1045 Sunday	Mt. Vernon Chapel
1045 Sunday	Fairfax Chapel
1230 Sunday	Belvoir Chapel



Confessions

1600-1630 Saturday – Belvoir Chapel
or by appointment call (703) 806-3312

Religious Ed. Classes

Pre-School through Adult 1045-1200
Sunday call (703) 806-3418

Sacraments of Marriage

Call (703) 805-5106 for appointment one year prior to expected date of wedding

Sacraments of Baptism

Pre-Baptismal Class for Parents and God Parents call (703) 806-3418

Protestant



Sunday Worship Services

Informal	0800 Belvoir Chapel
Contemporary	1059 Barden Ed. Center
Traditional	1100 Belvoir Chapel
Gospel	1100 Gunston Chapel

Religious Education call (703) 806-4179

Sunday School Age 3 through Adult 0920 - Religious Education Center

Youth of The Chapel call (703) 805-2727

Women of The Chapel meeting held every Thurs. of the Month 1900 – Tues (Sep – May)

Men's Fellowship 2nd and 4th Sat of the month 0730 Family Life Center. (Sep – Jun)

Jewish



Sabbath Service and Oneg Shabbat
2000 Friday – Belvoir Chapel

Saturday Service
Fourth Saturday of the Month 0930 - Belvoir Chapel

Hebrew School

Grades 3-8 - for information on Hebrew School
call (703) 806-4196

**For information about other faith groups or denominational services contact the
Chaplain's Office at (703) 806-4316/7**

Important Documents and Information for Spouses

It is very important for you, a military spouse, to have certain documents in your possession. If you are required to take full responsibility for your family due to a deployment, you will be able to do so without any problems. You should have most of this information already.

Please sit down with your spouse and gather this information and these documents. Keep the following documents in special container that you can find immediately!!!

Marriage Certificate

Birth Certificates for all family members

Shot records (up to Date) for all family members, including pets

Citizenship papers, if any

Adoption papers, if any

Armed Forces ID Card for all members (10 years or older)

Sponsor's Social Security Number

All government and civilian life insurance policies

Last LES (Leave and Earnings Statement)

Power of Attorney (Have several copies)

Copies of wills for both you and your spouse (It is important for your protection that both parties have a will.)

Several copies of your spouse's TDY and /or PCS orders

Current addresses and telephone numbers of members of your immediate families--yours and your spouse' (fathers, mothers, children, brothers, sisters). Have all imprint phone numbers readily available in case of an emergency.

Finances/Budget

Contact the ACS office for assistance with your finances at 805-4590/3413.

CHECK TO BANK: Open a JOINT checking account if you do not already have one. Then go to your PAC and fill out paperwork which will send your paycheck directly to the bank. This is the easiest, fastest, and safest, way to get your money. All married soldiers are strongly recommended to have a joint checking account with their spouses.

CREDIT CARDS: Keep plastic money to a minimum. It gives you a false sense of wealth where there really isn't any money.

ALLOTMENTS: This guarantees that a certain amount of money will always be deposited in your account. If you have to take casual pay for any reason, such as emergency leave, your allotment will still be secure. This eliminates a surprise shortfall in money to your family.

INSURANCE: Review current life insurance coverage to ensure that policies, other than SGLI, do not contain a war clause. This ensures that beneficiaries for all policies are correct and that premiums are covered during the sponsor's absence.

BUDGET/FINANCIAL COUNSELING: Contact the Army Community Service (ACS) in your Community for assistance in working out a budget.

SEE APPENDIX "H" FOR A FAMILY BUDGET WORKSHEET.

HOME SECURITY/CRIME PREVENTION

Crime and fear of crime are big problems which influence how you live. The most important resources we have in reducing these problems are neighbors working together to prevent crime. This makes it harder for crime to happen and reduces the chance for criminals to victimize you and your family members.

Crime is a local problem and can best be deterred through locally organized groups of neighbors and residents within housing areas. Many communities have active Neighborhood Watch type mutual protection programs, where neighbors look out for each others property and safety. Check with your military police to see if your community has such a program. If so, join up.

If not, start one. Get together with neighbors on your block, in surrounding streets, or in your building (if in quarters, check with your building coordinator or village mayor). Start by sharing crime prevention information. Exchange work and home telephone numbers with your closest neighbors. Keep them posted on your daily and vacation schedule. Let them know about scheduled repairs or deliveries. If they spot suspicious people or vehicles around your home while you are gone, they will know something is wrong and call the military police or the local police.

CRIME PREVENTION TIPS...

If your spouse is deployed, don't advertise it. This alerts everyone that your spouse will be away for an extended period of time.

ALWAYS lock your doors, even if you are only going out for just a few minutes. In addition to the front and rear doors, keep your garage, cellar, patio, storage areas, and maid rooms locked. Periodically check them.

If you live in government housing, are the doors to your stairwell secured? If so, are they consistently kept locked? If not, contact your building coordinator.

Ask a neighbor to collect any mail, flyers, and newspapers, so they won't pile up outside your box or in your mailbox. Stop deliveries until you return.

Be cautious of door-to-door sales people and other solicitors. If possible, conduct the conversation at the door. Be cautious who you invite into your house. If you invite a solicitor in, DO NOT leave him/her alone in a room.

Keep telephone numbers of the military police, city police, and ambulance next to your phone. Familiarize yourself with unit, community, and local emergency reporting procedures, such as: calling for police assistance, obtaining emergency medical help (especially the times to call the proper medical help), 911, etc.

Report suspicious persons or activities immediately to military police or local police authorities. Be especially cautious during special activities in your neighborhood.

Tell your children to never admit being home alone on the telephone or to someone at the door. Teach them to say: "Mom or Dad can't come to the phone and will call back."

Teach children how to contact the police or a neighbor; make sure they know their home address and telephone number.

Screen repair persons and solicitors to ensure their visit is legitimate. If possible, install a peephole in your door; if not, use a window.

Remember, disguises and uniforms are easily obtained. Before you let workers into your home, make sure there is a legitimate need and check their credentials. Call the firm/organization they claim to represent to verify their identities.

If you suspect/detect someone observing your home/activities or that of your neighbors, report it immediately to the police.

OVERSEAS TRAVEL

Passports are required for overseas travel. A regular passport is issued for unofficial travel. You must provide all required fees, including cost of photographs, at your own expense. You can obtain information about applications for new or renewal of expiring passports by calling 791-7681. You must be a United States citizen to apply. You will need the following items:

- Application fee (\$65.00 cashier check/money order)
- Certified copy of your birth certificate (for new passports)
- Identification (Military ID card, driver's license, or expired passport)
- Two passport pictures.
- Current immunization record.

A **VISA** is permission granted by the government of a country for an alien to enter that country and remain for a specified period of time. A visa is usually an imprinted stamp affixed to one of the pages in your passport. Each country you plan to visit may require visas. Apply for visas through your travel agent or at the various consulates well in advance of your departure date.

Miscellaneous: Be sure to purchase traveler's checks and exchange small amounts of currency into foreign currency before you leave. It may be possible to get reduced fares on airline tickets for traveling to CONUS.

Dependent Passport telephone: 791-7681 (Darling Hall)

It would be helpful if you notify your chain of concern POC or FSG representative of your travel plans prior to departure. Also, notify the Read Detachment Commander of your travel plans in case there is an emergency. Please use the form found in Appendix "I".

Soldier's Name and Rank: _____

Section or Platoon: _____

Single: _____ Married: _____ Spouse's Name: _____

Mailing Address: _____

Live in Barracks: _____ or Residential Address: _____

Home Phone: _____ Spouse's Work Phone: _____

Name of Local Friend or Neighbor: _____ Phone: _____

Other than Wife/Husband, who would you notify in case of emergency?

Name: _____

Address: Street & PO Box: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ Relationship to you: _____

SPECIAL FAMILY SITUATIONS: Mark (X) in appropriate spaces

_____ Wife has no driver's license. _____ Medical Problems

_____ No car _____ Exceptional Family Member

_____ Wife doesn't speak English. speaks: _____

_____ Wife is pregnant, Due Date: _____

_____ Other, Please explain: _____

CHILDREN:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

PRIVACY ACT STATEMENT: Authority U-S.C. 522a. and para 3-5, AR 340-2 1; para 2-8a. AR 210-7. Principal purpose is to gather data on family members of assigned soldier. Primary use of this information is to facilitate volunteers in providing command information to family members concerning unit events and in emergencies. I understand that my phone number will be published on the company spouses' roster that is available to company wives and the battalion chain of concern.

Appendix B

FAMILY SUPPORT GROUP TELEPHONE TREE

GROUPLEADER'S NAME: _____

TELEPHONE NUMBER: _____

MY TELEPHONE NOTIFICATION GROUP:

NAME

TELEPHONE NUMBER

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

NOTES:

Appendix C

FAMILY DEPLOYMENT CHECKLIST

Although extended deployments are never easy on the family, the hardships need not be increased by failure to plan ahead. A carefully prepared and executed pre-deployment checklist can save you and your family from giant headaches in the future.

It is very important for you, as a military family, to have certain documents in your possession. Military spouses are often required to take over the family during the sponsor's absence; therefore, it is important that both of you sit down together to gather information and documents named in this checklist. You are encouraged to keep originals or copies of all listed documents in a special container (safety deposit box) in a location you can find immediately and is known to both you and the sponsor. (Also see APPENDICES F & G).

_____ Marriage Certificate.

_____ Birth Certificates of all family members:

_____ Wife

_____ Husband

_____ Children _____

_____ Divorce Papers

_____ Death Certificates

_____ Shot records of all family members (including pets)

_____ Citizenship/Naturalization papers

_____ Adoption Papers

_____ Passports, Visas (remove only when needed for international travel)

_____ Insurance policies (Note: Company, Policy # and Amount of Payment)

_____ Real Estate Documents (leases, mortgages, deeds, or promissory notes)

_____ Copies of installment contracts and loan papers

_____ Current list of immediate next of kin, personal lawyer, trusted friend
(Include phone # and address)

Appendix C....continued

_____ Car title (registration should be in car)

_____ Last LES (Leave Earning Statement)

- _____ Discharge papers (DD Form 214)
- _____ Allotments (Updated with correct amount, name, address, account number)
- _____ Social Security Number of each family member
- _____ Current address and telephone numbers of immediate family members of both spouses.

The Following Should be Completed Prior to Deployment

- _____ Next of kin informed of rights, benefits, assistance available
- _____ Family budget and business arranged (See Financial Section for Budget Worksheet)
- _____ Emergency Data Card updated in Military Personnel Record
- _____ Joint checking/savings account arranged (List-all account numbers)
- _____ Parents informed of how to make contact in case of emergency (See Appendixes D,E)
- _____ Armed Forces ID Cards (Renew if ID Card expires within next 3 months.
Rear Detachment Commander can sign for ID Replacement after soldier deploys)
- _____ Emergency services explained and located:

_____ Red Cross/ Army Emergency Relief (AER)

_____ Medical facilities/CHAMPUS

_____ Army Community Service (ACS)

_____ Legal Assistance Office

- _____ Security check on house
- _____ Problems with cars, household, and appliances identified and resolved
- _____ Power of attorney

GENERAL: Allows holder to act in all matters on sponsor's behalf

SPECIAL: Allows holder to act on sponsor's behalf in special transactions.

MEDICAL: Authorizes holder to obtain medical care for family members under 18 years of age.

Appendix C...continued

- _____ Wills for both spouses
- _____ Orders

_____ Copy of Emergency Data Card

_____ List of all credit cards and account numbers

_____ AAFES Deferred Payment Plan (DPP), (to use, spouse must be listed as an authorized user or hold sponsor's General Power of Attorney).

_____ Federal and State Income Tax Returns (last 5 years)

HOUSE CARE CHECKLIST

Take a 10 minute walk through your house. Carry this checklist to help you truly see your home. The idea behind this walk is to look for fire hazards. You don't have any? Are you sure? Perhaps this list will change your mind.

KITCHEN:

YES/NO

Are curtains, dish towels, or paper items kept away from stove? _____

Is stove's exhaust hood and ductwork clean of grease? _____

Do you have a working fire extinguisher close at hand? _____

LIVING ROOM. DINING ROOM. BEDROOMS:

• Is fireplace spark screen always closed? _____

• Is electrical wiring/circuits/outlets adequate to handle load? _____

• Is there sufficient space for air circulation around TV/stereo? _____

• Are ashtrays available in home occupied by smokers? _____

• Are matches and lighters out of reach of children? _____

ATTIC, CLOSETS. STORAGE ROOM:

• Do you keep oily cleaning rags in tight metal containers? _____

• Are you using only nonflammable cleaning fluids? _____

• Do you avoid accumulations of paper and combustible materials? _____

WORKSHOP:

• Are combustible materials kept away from heat sources? _____

• Are paint thinners, paints, and solvents kept in their original containers for identification purposes? _____

• Are the furnace, heaters, vents and chimneys inspected and serviced regularly? _____

• Are fuses of the proper size for the circuits they protect? _____

• Are the dryer lint trap and vent kept clean? _____

Appendix C...continued

GARAGE. GROUNDS:

• Is gasoline for the mower stored in a safety can? _____

• Have you removed accumulations of trash and paper? _____

- Are oil-soaked rags in tight metal containers to prevent combustion? _____
- Do you use commercial starter fuels (not gasoline) for barbecue fires and are barbecue mitts emberproof? _____
- Are there dry leaves under porches or wooden stairs, in window sills, or anywhere else close to the house? _____

SELF CHECK:

- Do you inspect electrical cords frequently and keep them in good condition? _____
- Do you use extension cords only for temporary convenience, never as permanent wiring? _____
- Do you enforce a "NO SMOKING IN BED" rule? _____
- Do you and your family avoid using hair spray near open flames or while smoking? _____
- Does everyone in the family know how to call the fire department or dial the operator? _____
- Does each telephone have the fire, police, and ambulance numbers close to it? _____
- Does your family have a fire escape plan and has your family drilled with it? _____
- Do you make sure your children are not left unattended and instruct baby sitters about emergency procedures? _____

NOW IT IS TIME TO ADD UP YOUR ANSWERS. To how many of the 35 questions did you answer "NO" to One or two? Your home is pretty fire safe. But remember, just one can cause a tragedy!

If you had 5 or 6, you are risking the safety of your family. If you have more than 6, you are asking for trouble. **Take action NOW!**

SMOKE DETECTORS

Buy a battery-operated smoke detector. It is one of the best and most inexpensive forms of fire insurance. It will not prevent a fire from starting, but it may save your life! Be sure to check the smoke detector on a regular basis.

HOME TOOL KIT

- | | |
|--|-----------------------------|
| _____ Flashlight and extra batteries | _____ Hammer |
| _____ Assorted Nails, screws and tacks | _____ Screwdrivers |
| _____ Masking Tape | _____ Scissors and/or knife |
| _____ Pliers | _____ Wrench |
| _____ Furnace Filters | _____ Extra light bulbs |

Appendix D

EMERGENCY NOTIFICATION INFORMATION

Soldier's Correct Full Name: _____

Soldier's Rank and Pay Grade: _____

Soldier's Social Security Number: _____

Soldier's Unit: _____

Soldier's Unit Address: _____

Name of Exercise Soldier is on:

Full Name of Ill, Injured, or Deceased Person: _____

Relationship of Person Shown Above to Soldier: _____

What Hospital or Funeral Home is Person in: _____

Who is the Doctor Treating the Person: _____

Family Member who can Provide Additional Information: _____

Telephone Number: _____

Family/Doctor Wants Soldier to: Be Notified Only: _____ Come Home: _____

Leave Address Soldier should go to is:

Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

The Soldier will need About _____ days to resolve the problem.

**THE ABOVE INFORMATION MAY HELP SPEED THE SERVICE MEMBER'S
RETURN AS YOU CONTACT A LOCAL RED CROSS OFFICE, BE SPECIFIC!**

RED CROSS NOTIFICATION

(To be filled out by service member and sent home)

Dear family in the United States:

In the event you need to contact me quickly or need my presence at home, you must contact the American Red Cross (ARC) in your local community before I can receive permission to come home. A message from the American Red Cross is required before I can get the documents for transportation on military aircraft and/or commercial aircraft, and for leave authorization.

Following is the information which you should provide the local American Red Cross to contact me:

- My Social Security Number: _____
- My full name: _____
- My rank is: _____
- My mailing address is: _____
- My duty station is: _____
- My duty telephone is: _____
- My residence address is: _____
- My home telephone number is: _____

In addition, they will request some detailed information as to the nature of the emergency. As a minimum, you will need to know the name and address of the doctor, hospital, plus a statement as to why I am needed. I realize in case of death or critical illness in the family that you would want to call me directly, but you must also contact the Red Cross to authorize and expedite travel arrangements. You can contact the Red Cross 24 hours a day and there is no charge for this service.

Please place this document in the telephone book so that you can easily find it in case you need to contact me. This procedure applies regardless if I am deployed or at my home station. You might want to take some time to write down the local American Red Cross chapter in your community so that in an emergency you will not have to look it up.

Local American Red Cross Address: _____

Local American Red Cross Telephone Number: _____

Signed: _____

CAR MAINTENANCE

The family car is an important part of family life. The sudden and unexpected loss of the use of your car can be a real burden. During deployment, not knowing how to cope with car problems is just more aggravation your spouse must endure.

Please take time to fill in and go over the following information checklist. Discuss what problems may happen to the car and become familiar with the periodic checks that are a part of routine operation.

FAMILY DRIVERS LICENSE INFORMATION:

NAME	LICENSE NUMBER	EXPIRATION DATE
_____	_____	_____
_____	_____	_____
_____	_____	_____

AUTO DATA AND SERVICE INFORMATION:

Make: _____ Model: _____ Year: _____ Vehicle ID # _____

Warranty: YES/NO Location: _____ Car Title: YES/NO Location: _____

Car Registration: YES/NO Expiration Date: _____

License Plate #: _____ Expiration Date: _____

Inspection Sticker Expiration Date: _____

Auto Insurance: YES/NO Policy Number: _____

Auto Insurance Company: _____

Spare Keys: YES/NO Location: _____

Battery Type: _____ Make/Brand _____ Warranty: YES/NO

Tires: Make/Brand _____ Size: _____ Pressure: _____ Warranty: YES/NO

Oil Brand _____ Weight _____ Place of Purchase: _____

Spark Plug Brand _____ Type/Size: _____

MAINTENANCE SCHEDULE:

Servicing done at:

Name/Address _____

Phone _____ Appt. Required: YES/NO

Oil, Filter Change, Lubrication: Next Schedule Date: _____

Tune Up: Next Scheduled Date: _____ Approx. Mileage: _____

Special Instructions: _____

Tire Balance/Rotation/Front End Alignment: Next Scheduled Date: _____

Approximated Mileage: _____

SPECIAL INSTRUCTIONS:

RECORD OF PERSONAL AFFAIRS

DATE OF INFORMATION: _____

If you take the time to fill out this section you will have at your fingertips most of the personal information and data that would be helpful not only in routine situations but in emergency situations which might arise during your spouse's absence. The ready availability of this information in various situations could mean the difference between the timely provision of assistance or delayed problem resolution.

_____	_____	_____
(Last Name, First Name, MI)	(Social Security No.)	(Rank/Grade)
COMPLETE UNIT/LOCAL ADDRESS		COMPLETE PERMANENT ADDRESS
_____		_____
_____		_____
_____		_____

1. PERSONAL DATA:

1. Birth Date/ Location: _____

2. Naturalization (If applicable) on _____ By: _____

3. Parents: (Father, Name/Address) _____

(Mother, Name/Address) _____

4. Marriage: Spouse: (incl. Maiden Name) _____

Date/Location: _____

5. Children: (Full Names, Birth Date/Location)

6. Personal lawyer or trusted friend who may be consulted regarding my personal and/or business affairs: _____

7. Dependents other than immediate family:

II. LOCATION OF FAMILY RECORDS:

1. Birth Certificates: Wife: _____

Husband: _____

Child: _____

Child: _____

Child: _____

2. Naturalization Papers: Spouse: _____

Child: _____

Child: _____

3. Marriage Certificates: _____

Divorce Papers: _____

Death Certificates: _____

III. MILITARY SERVICE PAPERS:

IV. OTHER IMPORTANT PAPERS:

1. Wife's Will _____ Resident of _____

Executor's Name: _____ City/State: _____

2. Husband's Will: _____ Resident of _____

Executor's Name: _____ City/State: _____

3. Power of Attorney: _____

Agent: _____

4. Income Tax: Federal: _____

State: _____

City: _____

V. INSURANCE:

1. Life: _____
(Company) (Policy #) (Payment)

(Company) (Policy #) (Payment)

2. Property: _____

3. Medical: _____

4. Other: _____

VI. SOCIAL SECURITY NUMBER:

Wife: _____ Husband: _____

Child: _____ Child: _____

Child: _____ Child: _____

VII. PASSPORTS / VISAS NUMBER:

Wife: _____ Husband: _____

Child: _____ Child: _____

Child: _____ Child: _____

VIII. PROPERTY:

1. Real Estate Consisting of: _____

Located: _____

Encumbered by: _____

Held by: _____

2. Automobile: _____

(Make, Model, Year, State Registration)

Location: _____

Insured with: _____

Automobile papers located at: _____

3. Other Personal Property: _____

IX. BANK ACCOUNTS: (Number, Bank, Location)

Checking: _____

Savings: _____

Other (Specify): _____

X. SAFE DEPOSIT BOX at (Institution and Location with full address and telephone #)

Appendix G...continued

XI. STOCK, BONDS. SECURITIES. INVESTMENTS:

1 . Located at: _____

2. Beneficiary: _____

3. Document Serial Numbers: _____

XII. DESIGNATED BENEFICIARY: Names and addresses of persons designated on serviceman's official record of emergency data form to receive settlement of unpaid pay and allowances in the event of death:

XIII. DEBTS AND PAYMENTS:

(Agency, Company, Address, Amount Due, Date Payment Due)

XIV. FIRMS OR PERSONS INDEBTED TO YOU: (Name, Address, Amount)

XV. ADDITIONAL DATA ON ANY OF THE PRECEDING ITEMS:

Appendix H

FAMILY BUDGET WORKSHEET

1. ENTITLEMENTS:

Base Pay: _____

BAQ: _____

BAS: _____

VHA: _____

COLA: _____

Clothing Allow: _____

Spouse Income: _____

Other Income: _____

GROSS INCOME: _____

2. COLLECTION:

Federal Tax: _____

FICA: _____

Medicare: _____

SGLI: _____

Debt to Gvt.: _____

Other: _____

Other: _____

Other: _____

TOTAL COLLECTIONS: _____

3. NET INCOME:

Gross Income: _____

Total Collections: _____

Other Deductions: _____

NET INCOME: _____

4. EXPENSES (See Section 6)

Monthly Living Expenses: _____

Annual Expenses by Month: _____

Installment Debt: _____

Total Monthly Expenses: _____

5. MONTHLY BALANCE SHEET

Net Income (Section 3) _____

Monthly Expenses (Section 4) _____

Remainder (Plus or Minus) _____

Appendix H...continued

6. MONTHLY LIVING EXPENSES

a. Housing Rent/Mortgage (incl. Taxes/insurance) _____

	Utilities (Elec./Gas/Water/Sewer)	_____
	Telephone	_____
	Cable TV	_____
b. Food	Food/Household Supplies	_____
	Food/other (i.e., lunches/dinners out)	_____
c. Car	Gas/Oil	
	Car Payments	_____
	Other (maintenance, etc.)	_____
d. Personal	Hair Care (Barber/ Beauty shop)	_____
	Toiletries	_____
	Cigarettes/Tobacco	_____
e. Clothing	Family	_____
	Laundry/Dry Cleaning	_____
f. Other	Books/Newspapers/Magazines	_____
	Donations	_____
	Life Insurance	_____
	Club/Recreational Activities	_____
	Baby Sitters	_____
	Child Support/Alimony	_____
	Other	_____
g. Annual	Auto Insurance (divide by 12)	_____
	License Plates (Divide by 12)	_____
	Other (Divide by 12)	_____
h. TOTAL MONTHLY EXPENSES		_____

Appendix I

NOTIFICATION OF DEPARTURE FROM THE AREA

If you leave the Fort Belvoir area for any reason, it is important that the Commandant knows where you are. If there is an emergency, either on the field or during deployment, the unit needs to contact you. This is true whether you leave the area permanently, leave for a short visit, or go to visit friends.

If you cannot contact the unit to provide your location, please fill out the form below and mail it to the unit or leave it with a neighbor to deliver to the unit.

TO: Headquarters, INSCOM
Office of the Commandant
8825 Beulah St
FT Belvoir, VA 22060

This is to inform you that I have left the community. I can be reached at the following location:

Name: _____

C/O: _____

Address: _____

Telephone: _____

I expect to return on or about: _____

Appendix J

PRE-DEPLOYMENT CHECKLIST

Turn in to Company prior to deployment

DOES YOUR SPOUSE HAVE THE FOLLOWING PAPERWORK?

- _____ A current ID card?
- _____ A current passport?
- _____ Access to a checking account?
- _____ Enough money to manage household while you are gone?
- _____ A current Power of Attorney?
- _____ Current ID cards for children (In good condition)?
- _____ A driver's license?
- _____ Up-to-date car registration?
- _____ Up-to-date shot record for pets?
- _____ Current chain of concern phone roster?
- _____ Phone numbers of battalion rear detachment commander?
- _____ DOES YOUR FAMILY HAVE ANY SPECIAL MEDICAL PROBLEMS? (If so, get a statement from the doctor).
- _____ IS YOUR WIFE PREGNANT?
When is she due? _____
(If so, get a statement from the doctor, especially if it is expected to be a problem pregnancy).

PLEASE CHECK ALL QUESTIONS, SIGN AND DATE.

NAME: _____ COMPANY: _____ PLATOON: _____

SIGNATURE: _____ DATE: _____

